



THEME AWARD:

Demonstrating Value & Accountability

Organization	Initiative	Contact Information
Sunnybrook Academic Family Health Team	Putting Physical Activity Recommendations into Action: Sunnybrook's Walk with a Doc Program	Walter Leahy Executive Director



THEME AWARD: Demonstrating Value & Accountability

NOMINEE(S): Sunnybrook “Walk with a Doc” Team

ORGANIZATION: Sunnybrook Academic Family Health Team

INITIATIVE: Putting Physical Activity Recommendations into Action:
Sunnybrook’s Walk with a Doc Program

AT A GLANCE

Turning “get more active” into something patients can actually do. Sunnybrook’s Walk with a Doc program brings patients and primary care providers together for accessible community walks that combine movement, health education and social connection, creating a low-barrier way to build confidence, support prevention and strengthen relationships beyond the clinic.

THE OPPORTUNITY

Members of the Sunnybrook Academic Family Health Team (SAFHT) implemented the first Toronto chapter of Walk with a Doc, a healthcare provider-led community walking program that combines physical activity, health education, and social connection. We launched this initiative to put physical activity recommendations into action. By providing an accessible, low-barrier opportunity for patients to engage in physical activity, learn about a variety of

health topics, and ask questions of their healthcare providers, the program supports preventative care while strengthening patient engagement and connection to the health care team.

By creating a safe and supportive space for patients to connect with their community and care team, and engage in physical activity, this program supports chronic disease prevention and self-management beyond the clinical setting.

WHAT WE DID

While physical activity is often recommended in primary care, many patients face barriers, such as limited mobility, lack of confidence and social support, and difficulty accessing opportunities. In fact, over 74% of older adults in Canada do not meet the recommended Canadian Society for Exercise Physiology (CSEP) 24-Hour Movement Guidelines of 150 minutes of moderate to vigorous aerobic activity per week. The Walk with a Doc initiative was proposed by SAFHT patient Richard Gould, who recounted: **“It struck me that a Walk with a Doc program could potentially expand upon and complement many of the chronic disease prevention and management resources offered by the Family Health Team”.**

Sparked by Richard’s idea and Tom’s leadership, our interdisciplinary team, including members with expertise in family medicine, social work, research, and health promotion, was formed. Our team also includes a University of Waterloo co-op kinesiology student, who helps coordinate program delivery, logistics, participant communication, and research, making the program feasible to organize and sustain. Over the course of two years, our team implemented Walk with a Doc and adapted it to our local setting. In addition, we distributed a survey to SAFHT patients to gather feedback on scheduling, location, transportation, barriers to participation, and accessibility. We also offered an introductory session where patients could learn more about the program, connect with members of the team, and provide suggestions. Walk leaders also regularly check in with program participants and interested individuals to learn how the program can be refined to improve accessibility and support. These steps have helped us build a program that is shaped by community needs and adapted to support accessible physical activity, health education, and connection within our local community.

“Through this initiative, we have seen how accessible, community-based opportunities can strengthen connection and motivate patients to take meaningful steps toward improving their health. Participants have shared that Walk with a Doc helps them feel more connected to our Family Health Team outside of the traditional clinical setting, while also providing an approachable space to learn about different health topics and engage in movement alongside others.”

Tom Nguyen, a social worker and care navigator at the SAFHT, and lead of the Sunnybrook Walk with a Doc program

THE IMPACT

Since launching in March 2026, 29 people have registered for the Sunnybrook Walk with a Doc program and registration numbers continue to grow. Feedback from participants is positive, with attendees reporting improvements in motivation and confidence. The program has been especially supportive of participants with mobility and/or accessibility concerns, including individuals who may find typical community physical activity programs difficult to access. For example, the program has accommodated people who use mobility aids, as well as a participant with visual impairment. With multiple walk leaders at each event and several meeting points throughout the route, walks are designed to accommodate varying abilities and mobility levels, allowing participants to move at their own pace while remaining a part of the group. In addition to being accessible, the provider-led nature of the program has helped create a sense of safety and reassurance, particularly for individuals who are

One participant recovering from a hip replacement shared, Walk leaders have observed that participants are eager to discuss personal health goals and strategies for improving their well-being.

“The walks create opportunities for conversations that feel less doctor-patient and more natural than a traditional clinical visit. It has been great to connect with people in a different context and learn more about what is important to them.”

uncertain about their walking ability. For many participants, having a healthcare provider leading the walk has been central to their reason for participating. Overall, our experience delivering this program has reinforced the value for patients, including increase in confidence, accessibility, and connection with their primary health care providers and their community.[]

SUSTAINING AND ADVANCING THE WORK

We have received Sunnybrook Practice-Based Research and Innovation (PBRI) seed grant funding, which will help sustain both program delivery and our research study. Our team is conducting a research study investigating the enablers and barriers to sustained physical activity among program participants. Through longitudinal surveys, interviews, and focus groups, we are following changes in

participant physical activity over time and exploring the factors that help or hinder engagement in sustained physical activity. Preliminary baseline data identified lack of time, low motivation, work responsibilities, and poor weather as the most significant barriers to physical activity, while good weather, walking or exercising with others, enjoyment of activity, and established routine were the most significant enablers. Our team continues to refine the program through regular meetings, feedback from participants and walk leaders, and ongoing input from our PFAC. In addition, we are scaling up our promotional strategies, including clinic poster distribution, referral tools, and outreach to waitlist patients.

WHAT OTHERS CAN LEARN

The Walk with a Doc/Just Walk initiative offers a practical and highly transferable model for primary care teams to support physical activity, health education, and social connection in their local communities. Walk with a Doc/Just Walk has been successfully established internationally, with over 700 chapters worldwide, yet there are still relatively few chapters in Canada. This gap highlights a valuable opportunity for Canadian healthcare teams to adopt and adapt the initiative to move preventative care beyond the clinic. Our team has developed practical model that could support the launch of similar initiatives by other primary care teams. Our experience can also assist other primary care teams in identifying resources, partnerships, and team support.

This initiative offers other teams a practical example of how primary care can move physical activity recommendations beyond the clinic and into the community. Through a simple and adaptable model, teams can support physical activity while also creating a low-barrier opportunity for personalized guidance and a stronger connection to their care team.

SPREAD / KNOWLEDGE SHARING

Our team has taken several steps to share our Walk with a Doc initiative more broadly within and beyond Sunnybrook. Internally, the program has been promoted to patients and providers through SAFHT newsletters and ongoing outreach within the clinic. The initiative was also featured in the Spring 2026 issue of “Together: Stories of Collective Impact” published by the Centre for Advancing Collaborative Healthcare & Education (CACHE), highlighting the development of our program in collaboration with patient partners.[IW3.1] The article, “Patient Partner Initiates “Walk with a Doc” Program at Sunnybrook”, can be accessed here:

https://issuu.com/cache_uoftuhn/docs/together_stories_of_collective_impact_vol._4.2_s

Through conversations during walks, we have learned that participants value personalized guidance connected to their own goals, concerns, and starting points. Maism Sarwary, a physician assistant at the SAFHT and one of our walk leaders, shared,

“Walk with a Doc creates a relaxed team-based environment outside the clinic that helps break down traditional hierarchies and communication barriers. It allows us to better understand patients’ goals, challenges, and unique lived experiences within the healthcare system, strengthening our ability to integrate a comprehensive, biopsychosocial approach to patient-centered care.”

As recipients of Sunnybrook Practice-Based Research and Innovation (PBRI) seed grant funding, our team will share study progress and findings through PBRI communications and the PBRI Clinical Impact through Innovation Expo. We also hope our research findings will inform the development of practical resources for primary care providers and community

organizations. These tools could then be scaled to family health teams and community health centers through connections with AFTHO, the Alliance for Healthier Communities, Ontario Health Teams, and academic departments of Family and Community Medicine.

